

06-08-09

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PTO/SB/21 (04-09)

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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

14

Application Number

10/805,876-Conf. #9875

Filing Date

March 22, 2004

First Named Inventor

Gene Probasco

Art Unit

1615

Examiner Name

N. S. Levy

Attorney Docket Number

61842CIP(51035)

ENCLOSURES (Check all that apply)☒ Fee Transmittal Form☐ Fee Attached☒ Amendment/Reply☐ After Final☐ Affidavits/declaration(s)☒ Extension of Time Request☐ Express Abandonment Request☐ Information Disclosure Statement☐ Certified Copy of Priority Document(s)☐ Reply to Missing Parts/ Incomplete Application☐ Reply to Missing Parts under 37 CFR 1.52 or 1.53☐ Drawing(s)☐ Licensing-related Papers☐ Petition☐ Petition to Convert to a Provisional Application☐ Power of Attorney, Revocation Change of Correspondence Address☐ Terminal Disclaimer☐ Request for Refund☐ CD, Number of CD(s) _____☐ Landscape Table on CD☐ After Allowance Communication to TC☐ Appeal Communication to Board of Appeals and Interferences☐ Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)☐ Proprietary Information☐ Status Letter☒ Other Enclosure(s) (please Identify below):Certificate of Express Mailing
Return Receipt Postcard

Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name

EDWARDS ANGELL PALMER & DODGE LLP

Signature

Printed name

Jeffrey D. Hsi

Date

June 4, 2009

Reg. No.

40,024



Application No. (if known): 10/805,876

Attorney Docket No.: 61842CIP(51035)

Certificate of Express Mailing Under 37 CFR 1.10

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail, Airbill No. EM 053205377 in an envelope addressed to:

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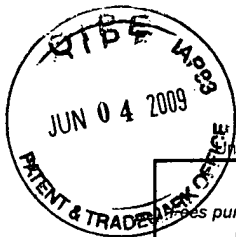
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Fee Transmittal (1 page)
Transmittal (1 page)
Amendment/Reply (9 pages)
3 Month Petition for Extension of Time Request (1 page)
Return Receipt Postcard
Charge \$555.00 to deposit account 04-1105



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| | | | | |
|---|--|--------------------------|------------------------|-----------------|
| FEE TRANSMITTAL For FY 2009 <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 | | Complete if Known | | |
| | | Application Number | 10/805,876-Conf. #9875 | |
| | | Filing Date | March 22, 2004 | |
| | | First Named Inventor | Gene Probasco | |
| | | Examiner Name | N. S. Levy | |
| TOTAL AMOUNT OF PAYMENT (\$) | | 555.00 | Art Unit | 1615 |
| | | | Attorney Docket No. | 61842CIP(51035) |

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 04-1105 Deposit Account Name: Edwards Angell Palmer & Dodge LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

| Application Type | FILING FEES | | SEARCH FEES | | EXAMINATION FEES | | Fees Paid (\$) |
|------------------|-------------|---------------------------------|-------------|---------------------------------|------------------|---------------------------------|----------------|
| | Fee (\$) | <u>Small Entity</u> Fee (\$) | Fee (\$) | <u>Small Entity</u> Fee (\$) | Fee (\$) | <u>Small Entity</u> Fee (\$) | |
| Utility | 330 | 165 | 540 | 270 | 220 | 110 | |
| Design | 220 | 110 | 100 | 50 | 140 | 70 | |
| Plant | 220 | 110 | 330 | 165 | 170 | 85 | |
| Reissue | 330 | 165 | 540 | 270 | 650 | 325 | |
| Provisional | 220 | 110 | 0 | 0 | 0 | 0 | |

2. EXCESS CLAIM FEES

| Fee Description | Fee (\$) | <u>Small Entity</u> Fee (\$) |
|--|----------|---------------------------------|
| Each claim over 20 (including Reissues) | 52 | 26 |
| Each independent claim over 3 (including Reissues) | 220 | 110 |
| Multiple dependent claims | 390 | 195 |

Total Claims 12 - 40 or HP x = Fee Paid (\$)

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims 2 - 6 or HP = x = Fee Paid (\$)

HP = highest number of independent claims paid for, if greater than 3.

Multiple Dependent Claims

Fee (\$) Fee Paid (\$)

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets - 100 = Extra Sheets /50 = Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 2253 Extension for response within third month 555.00 Fees Paid (\$)

| | | | |
|---------------------|----------------|-----------------------------------|----------------|
| SUBMITTED BY | | | |
| Signature | | Registration No. (Attorney/Agent) | 40,024 |
| Name (Print/Type) | Jeffrey D. Hsi | Telephone | (617) 517-5569 |
| | | Date | June 4, 2009 |